PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wf appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address. and indicated unless corrected below or directed otherwise in Block 1. by (a) specifying a new correspondence address. and indication is indicated unless of the direct of the properties in Block 1. by (a) specifying a new correspondence address. and indication is a personal FEE ADDRESS' m

aintenance fee notifications.	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying

34431 7590 11/24/2008 HANLEY, FLIGHT & ZIMMERMAN, LLC

150 S. WACKER DRIVE

02/20/2004

SUITE 2100 CHICAGO, IL 60606

10/783.840

papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United

States Postal Service with sulficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEB address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Michael W 7 i mmorman

20002/18500

7501

			MICHAEI W	. Zimmerman	(Depositor s issue)
			/Michael N	V. Zimmerman/	(Signature)
			February	24, 2009	(Date)
APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	CONFIRMATION NO

Gururaj Nagendra TITLE OF INVENTION: METHODS AND APPARATUS TO OPTIMIZE MANAGED APPLICATION PROGRAM INTERFACES

nonprovisional NO \$1510 \$300 \$0 \$1810 \$02/24/2009 EXAMINER ART UNIT CLASS-SUBCLASS WU, QING YUAN 2194 719-328000 I. Change of correspondence address or indication of "Fee Address" (27) CIFR 1.630). Change of correspondence address or indication of "Fee Address" (27) Change of correspondence address or indication of "Fee Address" (27) Change of correspondence address or indication for "Fee Address" (27) Change of correspondence address or indication for "Fee Address" (27) Change of correspondence address or change of Correspondence Address from PIO/SB/122) attached. (2) The name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) the name of a single firm (having as a member of agents OR, alternatively, (2) t	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
WU, QING YUAN 1. Change of correspondence address or indication of Tee Address" (27 CFR 1.65) Change of correspondence address (or Change of Correspondence address (or Change of Correspondence address for Change of Correspondence a	nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/24/2009
Change of correspondence address or indication of Tee Address" (37 CFC)	EXA	MINER	ART UNIT	CLASS-SUBCLASS]		
CFR 1.363). Change of correspondence address (or Change of Correspondence address from PTO/SB/122) attached. The Address from PTO/SB/122) attached. Cli the names of up to 3 registered patent attorneys or agents OR, alternatively, or agent and the names of up to 2 registered patent attorneys are registered attorneys or agent) and the names of up to 2 registered patent attorneys are registered attorneys or agent) and the names of up to 2 registered patent attorneys are registered attorneys or agent) and the names of up to 3 registered patent attorneys are registered patent attorneys are registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent attorneys are registered attorneys attorneys attorneys are registered attorneys or agent attorneys are registered attorneys attorneys attorneys attorneys are registered attorneys attorneys attorneys are registered attorneys attor	WU, QI	NG YUAN	2194	719-328000	-		
	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tee Address 'indication (or 'Fee Address' Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer		(I) the names of up to or agents OR, alternativ (2) the name of a singl registered attorney or a 2 registered patent atto	3 registered patent attorn vely, e firm (having as a memb agent) and the names of up meys or agents. If no nam	era Zimmer		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Intel Corporation

Advance Order - # of Copies

Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🔯 Corporation or other private group entity 📮 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee Publication Fee (No small entity discount permitted)

Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50, 2455(enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Date February 24, 2009 Authorized Signature / Michael W. Zimmerman/

Typed or printed name Michael W. Zimmerman Registration No. 57, 993

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 manates to complete, including gathering, preparing, and within 50 cm and/or suggestion. For excluding gathering, preparing, and within 50 cm and/or suggestion. For excluding this bardon, should be sent to the Chef Information Officer, U.S. Postariota Office, U.S. Department of Commerce P.O. Box 1450, Alexandria, Virginia 2231-450. DO NOT SEND FIES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.